

Thwing's (O. O.)

READ, INVESTIGATE & JUDGE FOR YOURSELF.

A PLEA

—FOR—

Eclectic Medicine,

—BY—

O. O. THWING, M. D.,

MARTINSVILLE, IND.

WOOSTER, OHIO:

REPUBLICAN STEAM BOOK AND JOB PRESS.

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If an opinion be erroneous, it requires discussion, that its errors may be exposed. If it be true, it will gain adherents in proportion as it is examined.—COOPER.

An obstinate adherence to an unsuccessful method of treating disease is self-conceit; it generally proceeds from ignorance; it is a species of pride to which the lives of thousands have been sacrificed.—GREGORY.

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PREFACE.

IN the following pages I shall endeavor, in a brief manner, to exhibit the relative merits and demerits of the Eclectic and Alopathic systems of medicine, as derived from matters of fact, observation and experience.

The principal part of the arguments, and much of the matter contained in these pages, I claim no credit for, as it is mostly borrowed from the writings of such men as HOWE, SCUDDER, NEWTON, BENNETT, CHAMBERS, etc. I make this statement on the start, so as to free myself of the charge of plagiarism. I am not ambitious of literary fame. My only object in issuing this pamphlet is to give the public some knowledge of our system of practice. Neither is it for the purpose of self aggrandizement, or to increase my already large practice, that I enter upon this subject. I know that there are many who will refuse to believe this, but I hope to convince even the most stubborn that this is no *advertisement*, when I say that I do not, at this time, intend to say a word about my chronic practice, which is the only practice that I care about sustaining. Although I stand ready to prescribe for all acute diseases, as well as chronic, that does not require a long absence from my office. I do not wish to increase my ride.

Those who understand the Eclectic practice, and *want that and no other*, and have stood by me with voice and patronage, may always depend upon me to visit them whenever necessary. But when it can be avoided, I do not wish to leave my office. Nor is it necessary, in treating most of the diseases of this climate, to visit the patient, as a prescription can usually be made in the office, cheaper and as well as at the bedside of the patient, for many cases of billious or remittant fever, dysentery or flux, diarrhea, ague, etc., which constitute the great bulk of our acute practice in this locality. As an example, I would state that I prescribed for from eighty to one hundred cases of billious fever and flux, during the months of July,

August and September, and out of this number I did not visit a dozen, and the average cost of treatment for each did not exceed three dollars. The time of treatment was usually two or three days. Now, had I made a visit to each of these patients daily, the expense would have averaged at least ten or fifteen dollars. I make this statement simply to induce those who are already my patrons, not to insist on my visiting them when it is unnecessary.

My refusing to go to a distance does not necessarily debar those who desire our practice from getting it, as there are several excellent Eclectic physicians in an easy distance in nearly every direction, among which I would mention Drs. GRINNEL & LONG, of Morgantown; Dr. CLARK, of Hindoostan; Dr. OSGOOD, of Gosport; Dr. KENNEDY, of Paragon; Dr. McALISTER, Alaska; Drs. EVERSOLE & HUNT, of Monrovia, etc. These physicians all claim to be Eclectic, and *most* of them I know to be qualified to treat all classes of diseases, but they devote their time principally to the treatment of acute diseases, and will always be found ready to ride to any distance at the call of the sick.

And now, with this slight preface, we will commence our subject with the inquiry which heads the next page :



WHAT IS ECLECTICISM?

ECLECTICISM is not confined to medicine alone. It is the vital and essential feature of all useful and progressive knowledge. It is the embodiment of that principle which frees itself from the errors, dogmas and rubbish of the past, and seizes upon the facts of the living present. As the various departments of science advance, it stands ready to appropriate and combine everything serviceable to humanity, or likely to promote the welfare of mankind. The name, Eclectic, commends itself at once to all who approve of liberal investigation, and who deem it their duty to gather knowledge from every available source. It is the most appropriate, because of the fact, that American medical reform owes its existence to an eclectic freedom of investigation, a departure from the dogmas of the schools, and an eclectic research into nature, and in the results of various clinical experiences by all classes of observers.

The necessity of reform in medicine, politics or religion, is never broached by the established or ruling class. The slightest innovations upon time honored customs, is met by the cry of *heresy*—hence, chronic evils in the body politic, remain so long uncorrected. The dearest liberties of the people have never been obtained except they were wrested from the grasp of tyrants. The free and restless spirit which unlocked the monkish cloisters of the middle ages, giving breadth and scope to conscience, liberty and learning, at length gave birth to Eclecticism, in religion, law and medicine. But these strides in the way of professional freedom and advancement, were not made without struggles, conflicts and revolutions.

All true science becomes every year more simple in its ultimate principles, and is rendered clearer by a few well selected comprehensive facts. This progress in general knowledge, which of late has become so perceptible, has weakened the popular faith in old school medicine.

During two centuries there was but one system of medical practice, and that was founded upon the law of contraries. Disease was considered a dragon to be destroyed by raising up a stronger one than the original beast. This doctrine of curing diseases by producing another, was called Alopahie, which signifies, producing another disease in the place of the original one, and this is the reason and philosophy of the use of the mercurials. Although there seems to be at present a concerted movement on the part of old school writers to drop or discard the Alopahic name, and to appropriate that of "Regular's." Their motive is well understood. It

is an attempt to escape the ill repute of the old name, and to take one which seems just now to be less objectionable. But to disclaim being Alopatic on their part, is as inconsistent as to deny a knowledge of calomel and tartarized antimony. I would that they might wipe out their distinctive name, and with it all the errors they have wittingly and unwittingly committed during the time they have been engaged in practicing upon a false basis and false principle. But the fear is that the stain is so great, that "it would need the tears of all the angels to blot the record out."

Eclecticism, as applied to medicine, means something more than the name would imply, "*to choose.*" In fact, there are certain doctrines which have been established, and theories advanced, that the tests and experience of nearly fifty years have demonstrated as correct, and uncontrovertable. It is a distinctive and fundamental principle of the Eclectic system of practice, that no medical treatment should be allowed, that *permanently impairs the vital powers.* In the choice of medicines, those should be always preferred which are safest and are calculated to act in accordance with physiological laws. We reject the most pernicious features of Alopatic practice, such as blood-letting, the use of poisonous metals, as antimony, arsenic, mercury, &c., their use being a gross violation of the dictates of sound medical philosophy, as well as in utter opposition to the principles of physiology. It is a principle of physiology, as well established as anything can be, and I here take occasion to say that no physiologist of any school will deny, that in order that any agent taken into the system may be assimilated, and then eliminated, or carried out of the system naturally, *must first be made into tissue*, and I would enquire of the whole Alopatic fraternity if they ever heard or dreamed of mercury, antimony, arsenic, lead or copper, being made into tissue? On the contrary, every particle of these agents that enter the circulatory system remain as a foreign body, and there they must remain, a constant source of irritation as long as the patient lives, unless removed by a chemical process, independent of the human organization. Think of it, you who make a weekly or monthly habit of swallowing blue mass or calomel, and then tell me how long you can continue to fill your tissue with these irritating substances, and preserve even the semblance of health. It is easily demonstrated that at least two-thirds of the chronic sufferers and hapless invalids, who are to be found on every hand, are made so by this pernicious system of drugging.

But this is a hackneyed subject, and those who have not had their convictions aroused, by what others have heretofore written, "would not believe hough one arose from the dead."

The discovery of the circulation of the blood, and the light that event threw upon the practice of medicine, especially at a time when the spirit of enquiry was rife in the world, ought to have been followed by the establishment of a rational system of medical practice. But the older and ruling members of the profession were obstinate. A huge outcry was raised against the discovery of Harvey. No man over forty years of age assumed

to believe in it. The same cry was raised against Michael Servetus, who, in attempting to discover the route the devil took to besiege the human soul, accidentally stumbled upon the circulation of the blood through the lungs. Harvey well understood the nature of the bigots who ruled the world in his time, and was too wise to risk being burnt at the stake, by announcing his discovery too hastily. He patiently waited eight or ten years before publishing the result of his investigations. And, notwithstanding this, he lost a great share of his professional patronage, by the storms of denunciation that was raised against him.

And this has been the case with every one who has been *unfortunate enough* to make an important medical discovery. It is well known that Jenner died in poverty because he happened to discover vaccination. And even in our own time you all recollect the abuse Morgan had to endure for discovering anæsthesia. A little incident in this town will serve to show the *animus* of these bigots. Two years ago I procured a hypodermic syringe, a *new thing* in medicine, so new in fact that at least one or two astute Alopaths opened their batteries upon, and prophesied all kinds of horrid results from its use. At this day, very few physicians, possessing the requisite amount of brains to practice medicine, consider that they can do without it.

It is not to be wondered at, then, that Eclecticism toiled slowly and painfully up, amidst the torrents of denunciation and fierce opposition arrayed against it. Eclectic medicine had to travel the same road that all important reforms have traveled before, until she stood in a position to defy the shafts of her enemies, and could count her advocates by thousands in every State in the Union.

For two centuries after the discovery of the circulation of the blood, no other doctrines of disease was thought worthy of consideration by any one, except that every diseased condition of the body was an *evidence of an exalted state of vital action*, which must be lowered by medical means. In other words, a person was supposed to have an *increased amount of vital action*, while sick, more than when entirely well. To fulfill the requirements of this state of the system, bleeding and the use of mercury constituted the leading features of medical practice. Mercury being a powerful devitalizer, took next rank to bleeding, but since the abolition of bleeding, it takes the first place among this class of advocates. Antimony, arsenic, &c., come in their order. In fact, the rank of each agent appears to be determined by its power to *prostrate* this "*exalted vital action*." Any remedy that will blanch the skin and thin the blood is worthy of profound consideration.

Alopathic physicians deny that this is now their theory, or doctrine of disease; but, so long as they continue to use these devitalizing agents, their denials amount to about as much as would Brigham Young's denial of being a Mormon, while he continued to advocate the principles of the Mormon Bible.

Opposition to this absurd doctrine and false principle in pathology, was the first and leading feature of medical reforms. Eclectics looked upon disease as the result of *depressed or reduced vital powers*, taking, in this way, entirely opposite and antagonistic views; and this constitutes the *main difference* between Eclecticism and Alopahy. But thanks be to progression and enlightened reason, not a few of the Alopahic brethren have received light on this subject, and some of the most eminent, because the most learned, under the title of *conservative* physicians, have placed themselves squarely on the Eclectic platform. When such men as Chambers, of London, England, (the Queen's physician,) Bennett, of Edinburgh, and Flint and others in this country, advocate the doctrines of the Eclectic profession, we need not fear the opposition of all the smaller lights combined. Many "radical" Alopahs yet affect to despise this "Eclectic view of disease," declaring that the admissions and arguments of Bennett and others *is giving aid and comfort to quackery!* These pretentious savans profess great respect for historical medicines, and it is very doubtful if they know of any other kind. Certain it is, their remedial agents are chiefly descended from Paracelsus and his disciples. Having such reverence for ancient medicine, it is a wonder they do not try to establish an "apostolic succession" in medicine.

There are but few outside of the medical profession who have any accurate conception of the Eclectic system of medicine. It is not an exclusive system, based upon one principle, requiring a certain degree of fixedness and uniformity of doctrines in its followers. It is not a perfect and finished system of science, like geometry and arithmetic, embracing a certain number of truths which can neither be changed or increased. It would be folly and dogmatism to claim such perfection for any medical system. It is not a systematic routine of practice, which may be learned like the alphabet and adhered to forever. It is not in any sense a finished, fixed or stationary system. On the contrary, it is a system of progress. It is not a system governed by any one dominant idea, theory or measure. On the contrary, it is a *comprehensive* system, which tolerates *all* ideas, and recognizes *all* contributions of science, as well as *all* the principles of healing, which does not *conflict* with our doctrine of *debility in all diseases*. In short, the Eclectic system recognizes every medical appliance except *depletion*. It is obvious, therefore, that none of the *pathies* express the objects of the Eclectic physicians. On the contrary, he adopts *all* the principles of treatment he deems appropriate. We may, therefore, put our nomenclature into a fashionable shape, by saying that the Eclectic system is a system in which its votaries have the largest liberty "*to choose,*" and which denies the right of any society to dictate a medical creed, or a limited, *exclusive* routine of practice to the profession; since every physician should be always ready to use any remedy which he has found to be useful, no matter whether colleges, societies or authors have recommended it or not.

There are not a few individuals, in every community, who have never

devoted one hour to the investigation of the claims of any system of medicine in their lives. Men who, twenty years ago, employed a certain physician and have never changed in all this time. If, however, their physician was a progressive one, and kept himself up with the times, all honor ought to be extended to the patrons who, recognizing this, have stuck to him so faithfully rather than to snap at any *new* bait which may have been temptingly held out to them. But how often it is that these physicians, notwithstanding the march of progress, continue to use identically, or nearly, the same treatment that they did twenty years ago. And the patient, if he fails to see any change from the *Dover's powders*, *nitre*, *blue mass*, *tartar emetic*, *calomel*, *jalap*, &c., which he took from his doctor in years past, and does not consign him to the place assigned to other fossiliferous remains, *does not deserve* any better treatment. These men, blindly taking the word of their fossil doctor, and having their prejudices aroused by the low, trifling, and contemptuous remarks of these advocates of ancient medicine, would doubtless be surprised at the pretensions of Eclecticism if they could be induced to examine the system and its claims. It is no wonder, then, that the old foggy element of society, who never deign to think or investigate for themselves, but depend upon their preacher for their religious belief, their doctor for their medical belief, their candidate for their political belief, should regard the Eclectic system of medicine as a very superficial system, when they have had their contempt excited by such epithets as "dogfennel doctors," "may apple doctors," "quacks," &c., &c. When physicians gravely state, in this community, (which, by the way, has exhibited marked evidence of being, in the main, an *intelligent* and *thinking* community,) that my practice has nearly all left me, or that such and such patients have died on my hands with some simple disease, or that some old woman has helped me out of some obstetrical difficulty, they succeed in convincing their satellites, who never come out of their holes except at their call, that I ought to be avoided; but they, at the same time time, convince the *intelligence* of the community of their own unscrupulousness. When physicians will run a simple case of remittant, or, as it is generally known, *billious* fever, two, three, four or more weeks, as in a large number of cases has been and is constantly being done by these ancient doctors, it is to be presumed that whatever they may say concerning Eclecticism can have but little weight. I am but a humble disciple of Eclecticism. There are many able men in our profession, men against whom my own skill and acquirements would weigh but little, but I here take occasion to say, and put on record, that when I ever treat a case of *simple, uncomplicated* billious fever two weeks without curing it, I will leave the profession *forever*, and never issue another pill or powder.

Understand me: There are some cases of this fever which are complicated with other diseases, such as inflammation of the stomach, liver or lungs, or the presence of worms or jaundice, etc., prevents its being promptly broken up. *I have not, however, had a case of fever of any*

kind, complicated or uncomplicated, for three years, that required my personal attendance one week.

Although it may be considered out of place in an address of this kind there is another matter that ought to be mentioned in this connection, but I approach the subject with fear and trembling. Nothing but what I regard as a sense of duty would induce me to incur the animosity which will likely be kindled against me, when I state that it is the custom of *some* physicians, as soon as their billious fever patients have run a week or more, to call it a case of *typhoid fever*. And here again let me be understood: I charge *no* physicians with wilfully deceiving their patients, but I think they honestly believe they are treating typhoid fever. I have not, however, seen a case of typhoid fever since I have been in Indiana, and it is hard for me to believe there has been any cases near me during this time. I saw one case in 1866 that I called typhoid, but I was soon convinced of my mistake. These assertions, I am aware, will be regarded as presumptive and egotistical in the highest degree; but, before sentence is passed upon me, let us see what is typhoid and what is billious fever.

Typhoid fever is a low, nervous fever, commencing slowly, and the febrile action never running very high, but continues about the same thing day and night, never decreasing and never increasing to any extent. The countenance is dull, pallid and shrunk: the eyes heavy and dull, and the head heavy, confused and giddy. The patient is generally torpid and careless. From the fifth to the eighth day the patient's mind becomes affected, *no wild delirium*, but the patient appears confused, bewildered and torpid. He reasons with difficulty and answers slowly. This dreamy, stupid delirium, which may occur any time after about the sixth day, we call *typhomania*. By the tenth or twelfth day, the bowels become loose, (sometimes they become loose much earlier,) and it is difficult to check them. This is a necessary consequence of typhoid fever, having its rise from ulceration of the bowels, which is always, sooner or later, the case, and of course the bowels *must run off*, and *of course* it is difficult to check this looseness so long as the ulceration continues. Towards the latter part of the disease, when it is suffered to run its course, the patient gradually sinks more and more into stupor, although the least noise arouses him for a moment, when he immediately sinks back into stupor again. This we call *coma virgil*. In about two weeks a peculiar rose colored eruption appears upon the neck and breast. This eruption is never seen except in typhoid fever, or typhoid pneumonia.

Real typhoid fever may in many cases, under Eclectic treatment, be broken up in from eight to fourteen days. *Alopathy lets it run its course, even if it should be two months, which is nothing unusual.* Typhoid fever proper is always, however, a grave disease to treat, but, fortunately, it is rare.

In *remittant* or *billious* fever, there is *always* an accession of fever at some time during the twenty-four hours. This may occur at any time of

the day or night, but, usually, the patient is better and the fever less in the mornings. As the day advances the fever increases generally to such an extent that by evening a high, burning fever is present. In a few hours, more or less, the fever commences to decline, so that by morning it is nearly, though not quite, gone. There is, generally, pain in the head or back, or both, aching of the limbs, &c. Frequently on the start there will be sick stomach, perhaps vomiting. The bowels *may be* loose in this disease, *but generally they are costive*. This is the usual course of bilious fever, although sometimes the fever will be highest in the morning and decrease towards night. Or, it may be highest at any part of the day. *But whatever hour the fever is the highest one day, at the same hour, or nearly so, it will be highest next day, or the second day.* Sometimes, though rarely, there are two accessions of fever in one day, and when this is the case of course the remissions are *very slight and difficult to notice*. Even when there is but one accession of fever in the twenty-four hours, it is sometimes so slight as scarcely to be noticed. But when you take the other symptoms into consideration, there is not much room for mistakes. After the fever has run a week or more, *it runs into a continued form of fever*, with remissions so very transient that it might, at this stage, be possibly mistaken for typhoid fever.

By reading the foregoing descriptions of these fevers, the community can judge for themselves whether I am right or wrong in my statements in regard to the non-prevalence of typhoid fever in this locality.

The Eclectic system is based upon a system of "renewal of life." Nothing can be tolerated by this system that is permanently contrary to this principle. It has been demonstrated by Bennett and others whom I have or could mention, that a great majority of diseases are not necessarily fatal even with no medication at all. This is certainly the most potent argument against depletion that can be urged. From experiments made in the most extensive hospitals of England, Scotland, France and Germany, and continued through a term of years, it has been demonstrated that only one out of thirty of all the sick will die. Take the figures of these same Alopathic physicians and they show that under the Alopathic practice *one dies out of every twenty-eight or twenty-nine*, proving thereby that Alopahic practice is worse than no practice. In Homœopathic practice one dies in thirty-three cases treated, showing that this system is slightly in advance of no medication.

Prof. Howe, of Cincinnati, has been receiving reports from hundreds of Eclectic physicians from all parts of the United States—city and country—and from these reports he is warranted in stating that in the practice of Eclectic's *only one patient out of sixty dies*. He, with his co-laborers, intend to place these figures before the Life and Health Insurance Companies, in order that those who patronize liberal medicine may have a discrimination made in their favor. By pressing these subjects before the attention of Legislative and corporate bodies, benefits of no small signifi-

cance ought to accrue directly and indirectly to those who advocate and sustain our rational system of medicine.

In pursuance of this subject, I wish to refer to my own practice, by reference to which it would appear that Prof. Howe has been very moderate indeed in his estimates.

Take my practice in this locality, and in the first place how many cases have I treated during the thirty-two months that I have been in Indiana? The whole number can be accurately discovered only by taking my books, page by page, and counting them, and then adding about one-fifth that have not been entered at all, as I only numbered the *prescriptions*, and only such of these as I thought of sufficient importance to place upon my books. But, without taking this trouble, we can approximate the truth near enough for our purpose. There will be no difficulty, I think, in proving to the satisfaction of every one who will take the trouble to investigate my records, that there has been at least four thousand prescriptions issued from my office, in this time, including those of Dr. Thayer. These prescriptions will average about two to the patient, making two thousand patients treated. I am confident that this is much less than the whole number, but as I do not wish to make any statement that cannot be easily and fully corroborated, we will take this number to represent the number of patients treated by myself and Dr. Thayer, in this country. Of this number seven died for whom I was the only physician called. Three died under Dr. Thayer's treatment under the same circumstances. Six others for myself and two for Dr. Thayer died on our hands, who had been under the care of other physicians, and were almost in *articulo mortis* when we were called. But the whole number, viz: 18, only shows a loss of *one* in every *one hundred and ten*, showing a much less degree of mortality than Prof. Howe exhibits. Take the cases that we were individually responsible for, viz: *ten*, and it shows a loss of exactly *one-half of one per cent.* or *one in two hundred*. It however must be admitted that there are localities where diseases are much more fatal than at this place, and of course Prof. Howe's estimates are taken from the results of Eclectic practice in every section of the country, and includes the practice of physicians of *great* and *small* qualifications, so that his figures must be much more correct than any made from any one individual physician in any locality. And it may also be urged that it is not just to take the practice of any *one* physician for two or three years as a criterion from which to judge, more especially during a time of pretty universal health, where the mortality must necessarily be light, from the fact that what sickness there may be is usually mild in grade. To which I agree, for the reason that were my *individual* practice for the last fourteen months to be taken as a criterion, the inference would be that no one ever died under Eclectic practice, as, during that time, I do not know of a single patient having died while under my treatment. It is possible that some consumptive, in some distant township, may have died while taking my medicine—but if so I

have not heard of it. I therefore give these arguments for what they are worth.

In concluding this little pamphlet, I may say that I am aware that the arguments and figures adduced here will weigh but little against the prejudice that exist in the minds of some. With some it is necessary that "line upon line, and precept upon precept," be added before they can even see the simplest truth. I have been accused of egotism and of making an extensive *blow* for the purpose of extending my own popularity and practice. I have no doubt that some of my opposing medical brethren have honestly supposed that the opposition Eclectics have expressed against their old foggy practice, has been dictated by no other motive than to get up a prejudice against mercury and other kindred poisons, *to add to their own individual profit*. While this *may have* been the object of some, for myself I deny and condemn all such aspersions on my motives. Gladly would I welcome every physician of my acquaintance into our ranks if I could. It is certainly an easy matter for Alopatic, as well as all other physicians, to inform themselves in regard to the advantages that we claim. We make no secret of our discoveries, or peculiar plans of treatment. On the contrary, they are published to the world, so "that he who runs may read," and if our opponents could divest themselves of their exclusiveness and devote one-half the time they do to abusing Eclectics, to investigating the Eclectic system of practice, they would be better satisfied with the results of their practice. It seems to be, however, a peculiarity of ancient medicine, that none of its advocates will investigate the claims of any other system, and the only way to make them do so is to hold up before the community the difference of the rival systems. I have no personal antipathy against any individual Alopatic physician, *as a physician*, but I do hate, with a never-ceasing antipathy, the narrow-souled bigotry which has sought to keep the medical profession fifty years behind her kindred sciences. I have often wondered why men who claim to the possession of ordinary intellectual faculties, and have mastered the rudiments of a noble profession, can be bound up in the narrow doctrines of any one exclusive *ism or pathy*. Such men will stand by and see patients cured in three days of a disease that often requires their daily services for three or four weeks, but instead of inquiring as to the means employed, they vent their envy and spite by abusing their more liberal and fortunate brother. How is it that they still continue to "kick against the pricks," many times risking their reputation and patronage before they will concede that "anything good can come out of Nazareth,"—in other words, that anything good can come from any other source than the "*regulars!!*"

It is these considerations, in part, which has induced me to publish the foregoing facts and figures. I know that I shall add to the animosity that has been displayed against me heretofore; but this shall not deter me. I have determined not to live under a cloud, nor have my doctrines or myself despised, even by a few old fogys, if I can help it. If the fore-

going facts, as far as relate to my own observations *are not true*, then I am unworthy of even the contempt of honest men. If they *are true*, where will you find an *honest* man despicable enough to censure me for setting them forth? It is time that more liberality was displayed by the individual as well as associated members of the medical profession. No system was ever killed by denunciation or persecution, but truth will always prevail. It is time that the thousands who belong to our own sanitary class should instruct the few that constitute the American Medical Association that they cannot make us travel in the same much worn track that was traveled by Paracelsus, Cullen or any other of those ancient physicians, who, however much they have been learned in their day, yet whose shoes are not large enough for us to wear in this progressive nineteenth century. There is no science but is progressive. Improvements are constantly being made in agriculture, in mechanicism, in short in everything. Then why should there not be in medicine? The physician who is well posted and up with the times, is constantly changing, in some particular, his practice. Diseases are becoming better understood each year, and better remedies consequently applied. My treatment for flux this year is not the treatment of last year. This year I have not had to visit a dozen patients out of nearly forty that I have prescribed for having the disease, and they have been cured quicker and better. My treatment for cholera infantum is considerably advanced and improved from what it was last year. Last year I lost one patient with this disease; this year none, although I have treated several more cases this year than last. And these remarks will apply to nearly the whole category of diseases, acute and chronic. Those who are habitual readers of the medical journals will agree with me in this.

I cannot close without saying a word to the young men of this country. The imperative demand for first class Eclectic physicians all over the United States, ought to be an inducement to those who possess the requisite amount of intelligence and education, to engage immediately in the study. I am frequently pained to see young men of great promise and fine abilities, under the influence of friends, etc., commence the study of medicine with these bigoted ancient doctors. And what is the result? After they graduate they find themselves able to salivate scientifically, but the people refuse their calomel. *They can prostrate "the exalted vital action,"* but the people will not take their tartar emetic; and in a great many instances they silently wait in their office for patronage, month after month, and year after year, until finally "hope deferred maketh the heart sick," and they either leave the profession, which has cost them years of hard study and many dollars in money, to engage in some other avocation for a livelihood, or do as hundreds are doing, post themselves in the true science of medicine, throw aside their exclusiveness and bigoted prejudice, and as Eclectics take their place, where they ought to be, in the front ranks of the profession. If your Alopath thinks he possesses superior merit in any department of medicine, his unjust *code of*

ethics prevents him from letting it be known. How often do we find graduates from Alopathic schools engaging in life insurance, selling sewing machines, seeking for office, peddling books, or teaching school, &c., &c., after they have waited until patience ceased to be a virtue, for practice. It would be folly to deny, however, that some Alopathic physicians do get a large practice, but when they do I am justified in saying that they have but little opposition—the community is careless—or they do not reject the doctrines of the modern reformers. I have noticed that the Alopathic physician at this day who excels in his profession is a great admirer of Chambers and Bennett. The majority, however, of young Alopathic graduates find themselves old fogys in medicine, and, like an undisciplined army in action, is obliged to learn the tactics and organize in the face and under the fire of the enemy, or retire from the field. If the mechanic with a few old-fashioned tools cannot compete with one who possesses and understands the use of all the implements and devices of modern art, how can the physician who employs a few old drugs expect to successfully compete with one who has at his command the multiplied hundreds of new and improved remedies.

I invite the attention of those desirous of entering the ranks of the medical profession to the fact that every *well educated Eclectic physician*, who is in all respects a *worthy gentleman*, is speedily rewarded by a large practice. I do not know an exception to this rule, and when you find an Eclectic without patronage you may set him down as not posted, or there is some greivous fault in the man. The demand for Eclectic physicians far exceeds the supply. In fact, we need several more in this county. But so long as better openings and locations invite them on every hand, we must be content with what we can get. *Not a term closes at any of our numerous colleges but that the professors receive letters from all parts of the country, asking that they send them some of their graduates.* As Eclecticism becomes known, of course it begets a demand for it, but many years must necessarily elapse before this demand can be supplied. This must, however, eventually occur, as there is no withstanding the force of public opinion, especially when the movements are founded in *truth*, in *philosophy* and *right*.

I have alluded to the code of ethics adopted by the Alopathic profession, and permit me to say that Alopathy graduated, and Alopathy, that never saw even the outside of a medical college, alike swear by this delectable code, and this too, when it is well known that there is not an Alopath in the State but has, and is constantly violating some of its rules. What is it then that makes them so doggedly stand up for it? The answer is very plain: They have no confidence in one another, and the fear of professional ostracism keeps them, as a class, from condemning what they know to be the most unjust and bigoted set of rules ever enacted to control educated and thinking men. Even those who dare express themselves against its unjust provisions seem to be so frightened at their temerity,

as to be ready to submit to anything rather than to have themselves called to account for it. A very able, and by the way, a very sensible address from one of the most liberal minded Alopaths, probably, in the city of Indianapolis, lies before me while I write. This address is all about the code, and condemns many of its provisions as strongly as any Eclectic could desire. But judge of the man's consistency. While he dare condemn in no measured terms the code, and even goes so far as to pronounce Eclectic physicians *regular* under the ; law his craven heart is so terrified by that august body called the American Medical Association, that he dare not consult with any physician except he be an Alopath.

My readers will recollect the sensation created in the medical ranks last winter, by the Alopathic Medical Association, of New York, dismissing from the Association Dr. Gardener, because he had so far forgotten the code as to consult with a Homœopathic physician. Shades of Galen ! Do we want any further evidence of the narrow-minded bigotry which controls the souls and consciences of this branch of the profession than this ? The American Medical Association establishes the rules, and if you step aside from them, even to save the life of a patient, you are in danger of being dismissed from the profession and be branded as *quack* ever after.

The Eclectic code of ethics is like the principles of the profession, liberal in spirit and unjust in nothing. None of its provisions prevent the Eclectic physician from recognizing the graduates of all regularly chartered colleges, as physicians, so long as they are *gentlemen*.

We are encouraged, however, by even the hesitating and timid opposition which we notice from the more liberal-minded Alopaths to their code. Even this is destined, without doubt, to work a wholesome reform eventually, for, as their numbers increase, so will their courage, until their efforts compel the profession to become more eclectic in spirit and just in principle. I expect to live to see the day when even a member of the American Medical Association will meet me at the bedside of the sick without fear of decapitation.

In closing this desultory address, it will be proper for me, and justice to my competitors, to say that *personally*, I have nothing to complain of from my Alopathic compeers in the way of consultations, &c. Many of them have treated me, in this respect, with the utmost professional courtesy, and with one exception, I have never been refused when I desired their assistance in operations, &c.

In the foregoing pages I have intended to be general in my remarks, and I hope that no individual physician will take anything in this pamphlet as personally aimed at himself. I am laboring for the good of Eclecticism, in all things, and it would be a happy day for me, should I live to see the time, when Religion and Medicine will throw aside their creeds, and like the law, become eclectic and liberal in every department.

OCTOBER 15th, 1868.

